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An Inaugural

Dissertation, on the subject,

of

Phthisis Pulmonalis

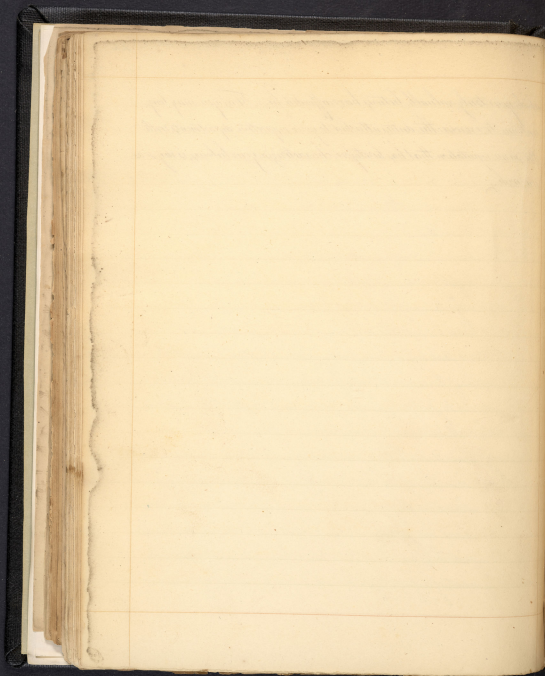
Together, with a few remarks,

On the treatment of

Hæmoptysis.

Submitted, to the examination, of the
Trustees, and Medical Professors, of the
University of Pennsylvania,
Degree, of the Doctor of Medicine.
by T. Richmond.

admitted March 5th 1810.



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It is with great diffidence, that I attempt to treat of a disease, the cause of which, has eluded the research, and baffled the skill, of the most eminent, and experienced of our profession. I allude to *Phthisis Pulmonalis*. From the many theories, of this disease, which have been promulgated, by authors of the just respectability, I will select that, which considers it as a chronic form of Pneumony. I shall therefore in the first place, describe the causes, which induce the disease, secondly, point out the symptoms, which attend it, lastly, treat of the remedies adapted to its cure. In the first place, I am to consider the causes. These are divided, into the remote, and exciting; but in as much as one, is often the cause of the other, I will enumerate them, without regard to distinction.

1st Malconformation of the Throat, is sometimes a cause, of *Phthisis*, being either hereditary, or accidental, in consequence of which, respiration, is attended with difficulty, and a troublesome cough, the result.

2nd Disorganization of the abdominal viscera,

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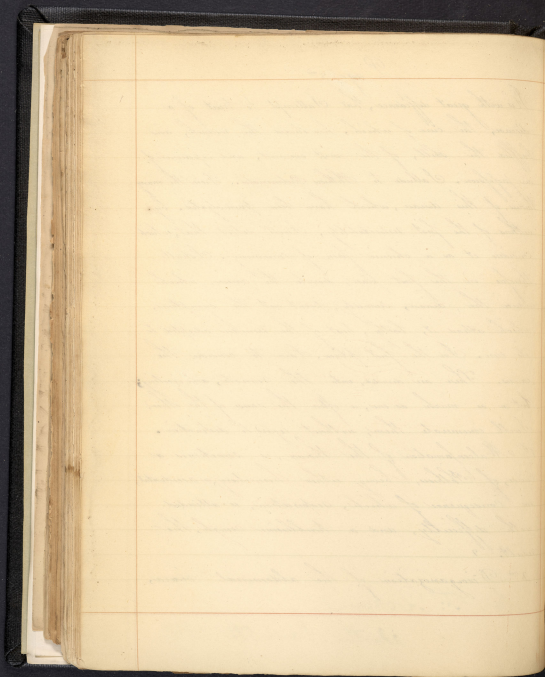
and particularly, a chronic enlargement, of the liver.

3^d Many diseases, of an inflammatory type, and more especially those, which very materially derange the stomach, which may be considered, as the primary organ, of most diseases; such as fever, gut, rheumatism, influenza, asthma, measles, hyperchondriasis, &c. &c.

Scrophulous in England, has been attributed, to the frequent prevalence of scrophulous. Dr Cullen places hæmoptoe, as among the frequent, of the causes. An hæmoptoe, is no doubt, an indication of a predisposition, and frequent the its occurrence, prevents the disease; however, I am far from believing with the Dr that it is often a cause, of the disease.

4th Sedentary occupations, are among the most common causes, of this complaint, particularly those, which require, a bent position, of the chest; and in confined places, where the atmosphere, is rendered impure, by dust, smoke, or other irritating matters, floating in it.

5th Passions, are not the least among the causes,



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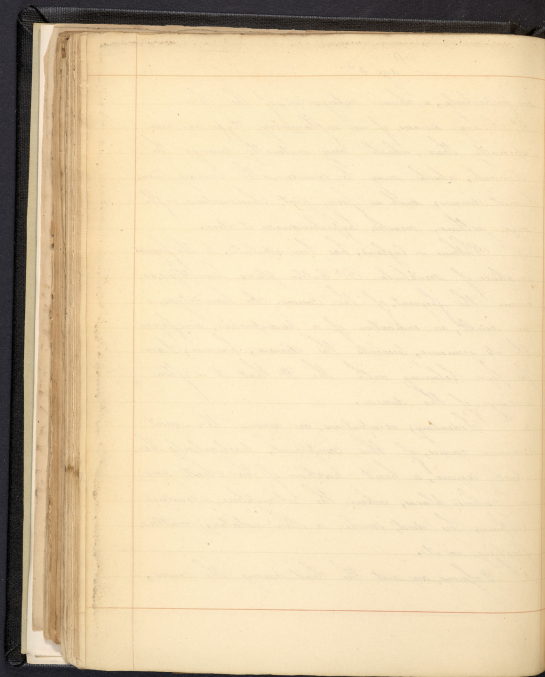
hence we see so many of an unstable, and spiritless disposition, labouring under this disease. Under this head, I will mention the removal of appetite, unindulged.

6th Irregularity in living. Excessive eating, and drinking, and more particularly the vice, practice of hot meat suppers, which obstruct the stomach, injure digestion, debilitate the system, and finally lay the foundation of this fatal disease.

Females are apt to err in the other extreme, partly in consequence of the opulence, occasioned by their indolent state, and partly on account of the vast pleasure, they derive from the aspect of delicacy, they do not satisfy the calls of nature, and thus become abstemious. This irregularity in living, is frequently the cause of diarrhea, dysentery, & colic. I shall therefore under another head, mention excessive evacuations.

7th Diarrhea, dysentery, fluxus albus, diabetes, excessive menstruation, lactation, &c.

8th Rapid growth, from the age of 14, to 21, is mentioned,



as not an unfrequent cause.

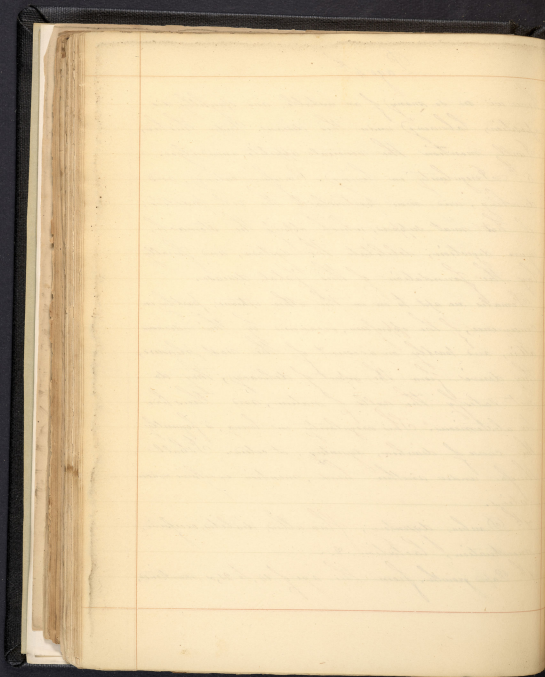
9th Any discharge from the surface of the body suddenly healed, without producing at the same time, an artificial drain. 10th Change of climate, may be considered as another cause.

11th The last of the causes, which, I shall enumerate, is an Hereditary predisposition, independent of the malconformation, formerly mentioned, and this I consider, as the most dangerous, and difficult of cure.

Many, and diversified, as are the opinions respecting, the contagious nature of this disease, I believe it is very seldom the case, and only, when it has progressed, to its final stage, partaking of the typhus character; attended with foul breath, fetid sweats; and even then, not unless it is applied in close contact, and for some length of time.

D^r Cullen is an advocate in favour of its non contagious nature.

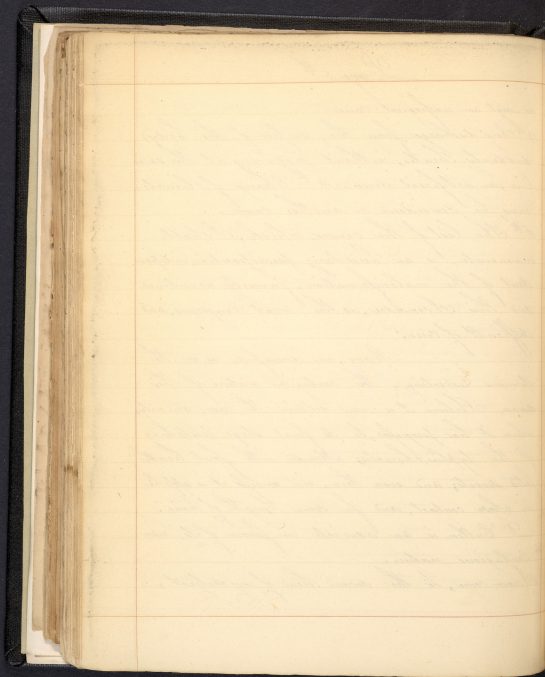
I now come, to the second head of my subject,



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which is, to describe the symptoms, attendant on the disease. The whole system generally suffers a length of time, before any local disease is supposed to be present, in consequence, as I presume, of that universal law of the animal economy, which Dr. Chapman terms sympathy, or consent of parts.

When the local symptoms, first made their appearance, they are very seldom violent, or of long duration, scarcely sufficient, to demand the attention of the patient. I will first mention a peculiarity, with regard to the pulse, and the patient's feelings. The pulse, is generally at first affected with quivering, which may be increased, on the least exertion. The patient, is more easily fatigued, than when in health; respiration is more difficult, than usual, headache, vertigo, fainting, and liability to take cold, on the least exposure. The bowels, are more easily affected than natural. The patient experiences a burning sensation, in the palms of her hands, more especially in the evening.



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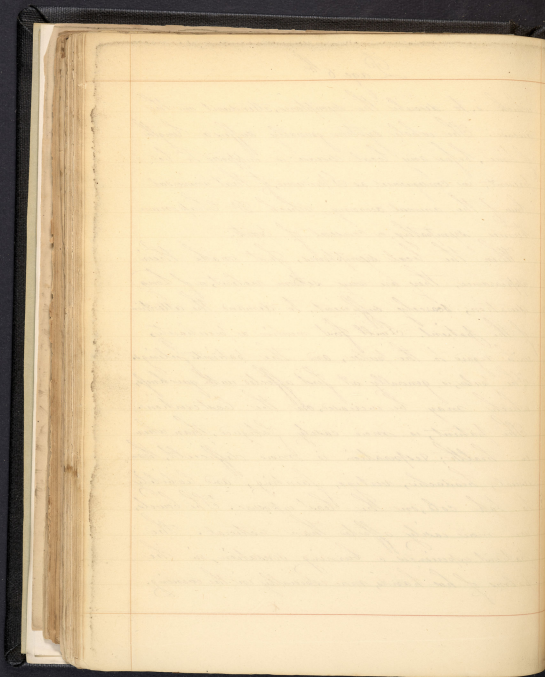
The urine, is proportionally increased, and the skin uncommonly dry. Uneasy sensations, are experienced in different parts of the chest, and sometimes the pain is fixed. The appetite is sometimes proportionally increased, and at others impaired. Languor, listlessness, hoarseness, and guttling of the voice.

These symptoms alone, are very alarming, but more especially so, when attended with the usual marks, of an hereditary predisposition, and these - far should demand, our most assiduous attention.

If we neglect our patient at this period, we will generally find the symptoms, return with redoubled energy, attended with fever, pulse hard, and tense, cough, of the most alarming nature, sometimes, mixed blood, and much expectoration, but generally speaking, this cough, at this stage is dry.

The appetite, is more impaired than before, and the pain in the chest, more alarming.

After these symptoms have continued for some time, they are succeeded, by the hectic stage,



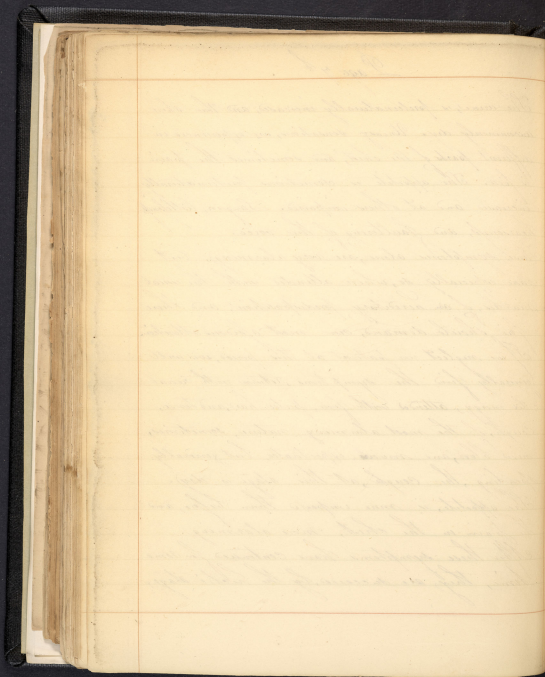
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to describe the symptoms of which, is not a little embarrassing, sometimes attended with inflammation, and at others, partaking of the typhus character. As a general rule, the pulse is hard, and frequent, often from 130 to 140 in a minute, during the paroxysm, and very seldom below 90, during the remission.

Respiration, is rendered very laborious during the paroxysm, but is very much relieved by what is termed, the hectic sweats. The appetite in this stage, is surprisingly good; but notwithstanding this, the patient wastes and emaciation, takes place.

The tongue is clean, and frequently polished. The urine is increased, and deposits a sediment.

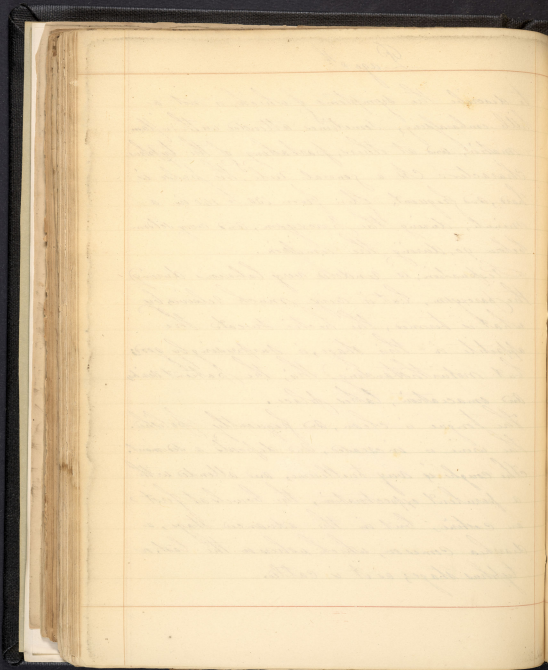
The cough is very troublesome, and attended with a purulent expectoration, the bowels at first are costive, but in the advanced stage, a diarrhoea comes on, which lasts in the last, or typhus stage, as it is called.



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In this, the pulse is small, weak, and rapid, emaciation increases very fast, the eyes sink into the head, the voice falters, the cough becomes more troublesome, and the unhappy sufferer, while he fancies himself, on the recovery, is suddenly launched into eternity. From all that has been said on this subject, it is obvious that consumption is a disease, ~~which~~ ^{which} will demand all the powers of the ^{mind} ~~person~~ to combat. There is no disease, with which we have to encounter, that demands our most vigilant attention, to its forming stage, more than pulmonary consumption, and there are few diseases, more easily cured, when timely attended to, and none, more fatal, when neglected.

I come now to my third and last general division, which is, to treat of the remedies, ~~adapted~~ ^{adapted} to its cure. The remedies for Pthisis, must be adapted, to



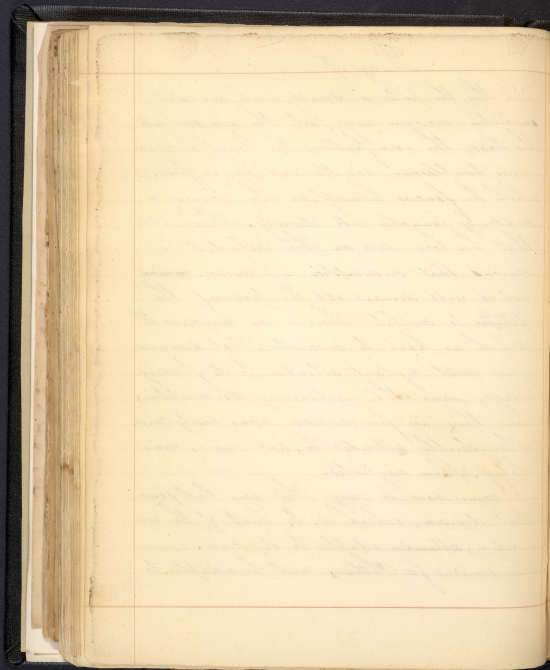
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the state of the system, and to the removal of the causes, if they continue to act. When the disease is hereditary, the best means of eradicating it from the system, is to advise for the subject of it, some employment, which will require constant labour, carried on in the open air.

When it originates in consequence, of some of the diseases, formerly mentioned, we should be more particular, as respects the cure of those diseases.

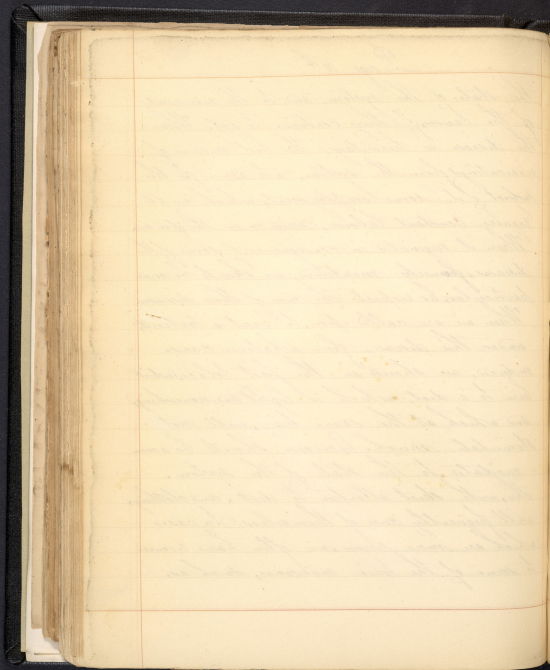
When we are called upon, to visit a patient, under this disease, from whatever cause induced, we should in the first place, restrict him to a diet, which is light and nourishing, and which at the same time, will not stimulate much. Exercise should be accommodated to the state of the system.

This, with strict attention to diet, and clothing, will frequently cure of themselves. In cases which are more serious, we often have recourse to some of the tonic medicines, such as,



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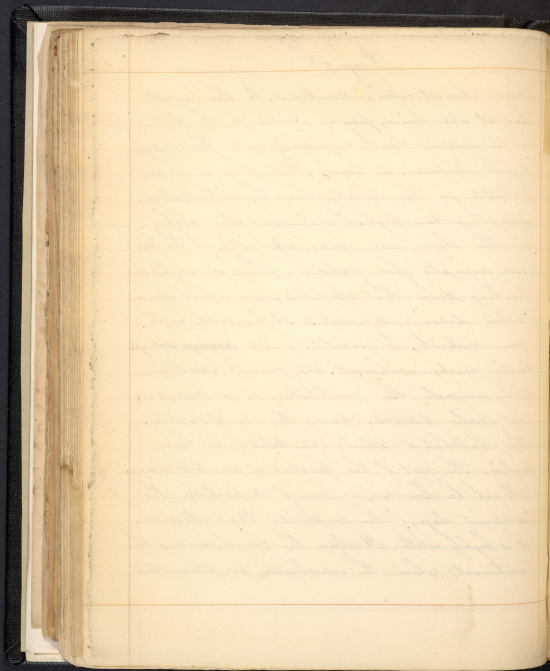
"Bark, Iron, & cetera, sometimes, to the lancet,
and at all times, paying attention to the state
of the system. I will respectfully quote the words of
professor Chapman, in saying, that there is no sub-
stitute for the lancet, when the inflammatory
symptoms run high. Emetics, are often useful
in this stage, and more especially, if the dis-
ease originates from catarrh. They are useful in
beating down that association, upon which disease
action depends, administered so frequently as in
some respects, to resemble a sea voyage sickness.
Emetics equalize excitement, and promote absorption.
They invigorate the constitution, in a manner,
not easily described. Among the class of emetics,
the Sulphate of Copper & White Tartar &c has been
preferred. The crisis of this practice, is due to Dr. Ferrius.
Much has been said, in favour of Rhus Toxicaria in the
incipient stage, of this complaint. By Dr. Magendie,
it is highly extolled. It calms the cough, equalizes the
excitement, relieves the expectation, and produces sleep.



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D'Almeida states, that he has frequently given it in the place of opium, when that could not be given in consequence, of sickness at the stomach. ~~D'Almeida~~

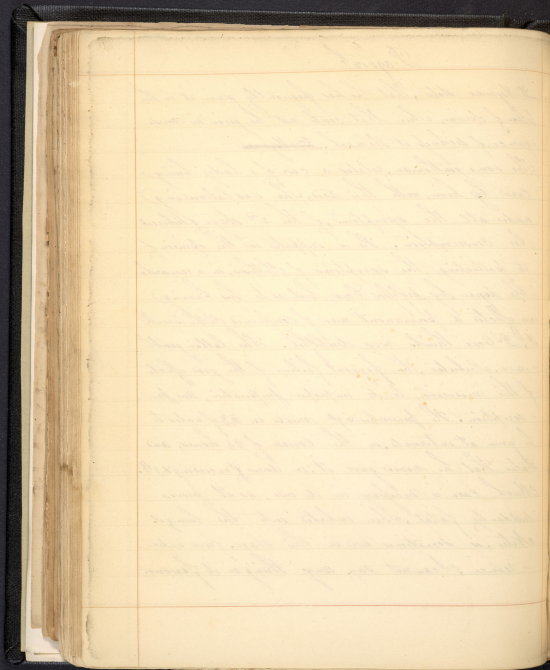
The same gentleman, relates a case of a lady being cured by him, with this acid, who was laboring under all the symptoms, of the 2^d stage of tubercular consumption. He is supported in the opinion of its palliating the symptoms of Phthisis, in a remarkable degree, by Professor Cox, but as to his having effected a permanent cure of confirmed Phthisis with it, Dr Cox thinks very doubtful. The latter gentleman, attributes, the frequent failure of the good effects of this medicine, to its improper preparation, and prescription. He prescribes eight minims in $\frac{1}{3}$ of water to be given at intervals, in the course of 24 hours, and states that he never gave it, in doses exceeding $\frac{1}{4}$. Much care is necessary in its use, as it proves suddenly fatal, when inhaled into the lungs. Nitre, is sometimes used in this stage, from experience, I cannot say any thing in its favour.



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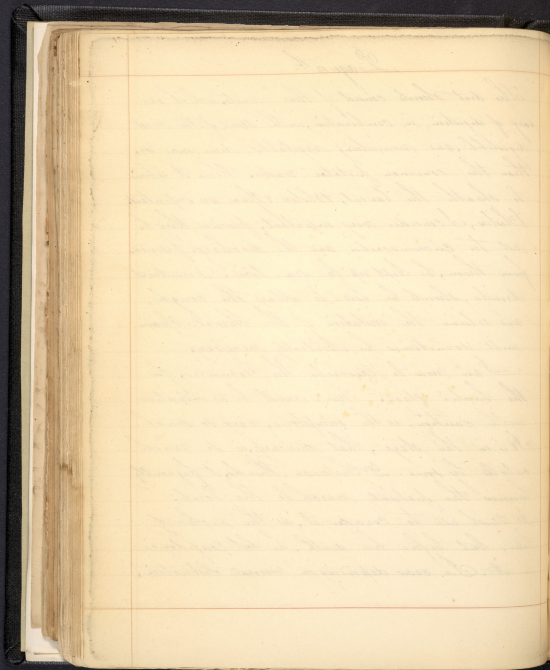
The diet should consist of those meats, which are easy of digestion, in combination, with the some of the most digestible, and nourishing vegetables, none more so, than the common potatoe roasts. When it is time to sheath the lancet, Wholes & Issues are important. Wholes, I consider very important, provided they be not too circumscribed, and the discharge proceeds, from them, be kept up for some time. Demulcent drinks, should be used to allay the cough, and relieve the irritation of the throat. Opium will sometimes be essentially necessary.

I am now to describe the Remedies, for the hectic stage. These must be administered with caution, as the symptoms, vary so much. It is in this stage, that mercury, is so much extolled by some. Dr Chapman, therefore, it frequently hurries the patient, march to the tomb. I think now to consider it, as the anchor of hope, but before his death, he lost confidence in it. In cases depending on visceral obstruction,



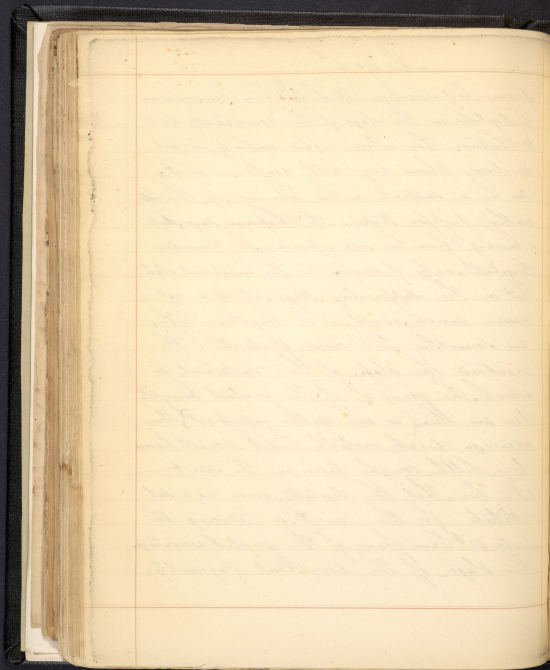
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it may be of advantage. Much has been said, in favour
of Digitalis in this stage of the complaint, but
Dr Chapman than whom higher authority is not
necessary, places very little confidence in it;
and he is supported in his testimony, by the late
worthy physician Wistar. Dr Chapman says, deter-
-mining upon his own experience, he considers
Digitalis, only, of service in the incipient state,
but in the suppurating stage, it does not
deserve much, except, as it lengthens life,
and smooths the hour, of death. He
mentioned the stage, of the complaint, in
which, he found it of the greatest benefit.
Now and then, as our author expresses it, there
occurs, in weak, irritable habits, small hamp-
-tyis, little cough, pain in the side &c.
It is here, that the Digitalis, given as a sal-
-utary for the Lungs, in reducing the
pulse, I have found of the greatest advantage.
This stage of the complaint frequently,



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assume the anasarca type, and demand the same diet, as are used, for that complaint such as, the Cornish, the vegetable foods, &c. &c. When the typhus symptoms make their appearance, very little hopes may be entertained of our patients recovery; however I will again quote the words of Professor Chapman, as saying, that we should never consider any thing done, while as yet, there remains any thing, to be accomplished. At this stage of the complaint, the patients diet, should be the most cadical, and savoury. He should live on the white meats, and his drink, to consist of Lemon Pate, with Punch, Opium, Brandy, Wine &c. &c. If the stomach will bear it, Beer, combined, with the stimulating bitters. Frictions of the skin, with something stimulating; stimulating applications, to the extremities.



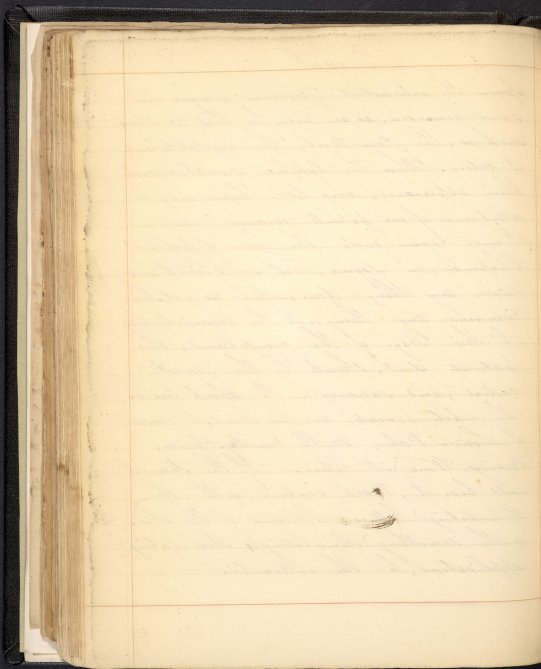
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The remedies, for the nocturnal sweats,
are Lime water, Pot. Pot., Arsenic, Mineral and
Sulphuric Acids, Opium, &c., eating of water
= melons &c. The diarrhoea, is best managed
with chalk pulp, and Laudanum, as astringent
injections, Compound of Laudanum, Kino, &c. extra.
But little will all our prescriptions avail,
unless aided by our patients, strict absten-
= tence, to his diet, clothing, exercise, &c.

On Haemoptysis.

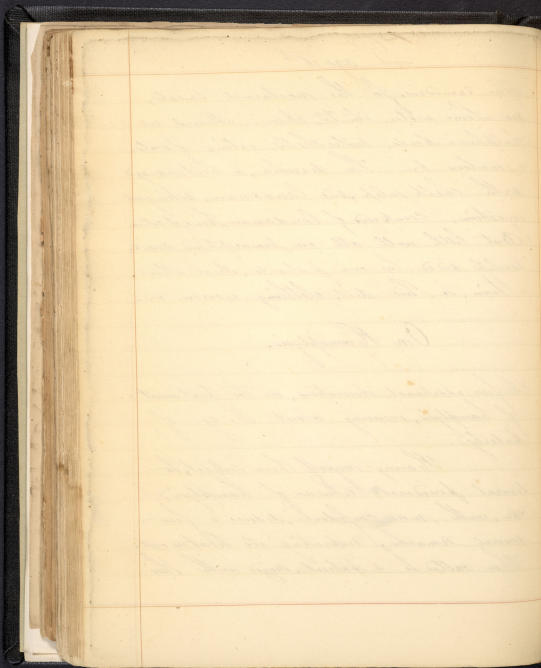
A few additional observations, on the treatment
of haemoptysis, occurring about the age of
puberty.

Having myself been subject, to
several periodical returns of haemoptysis, I
can, with more confidence, deduce a few
general remarks, respecting its treatment.
When called to a patient, seized with this



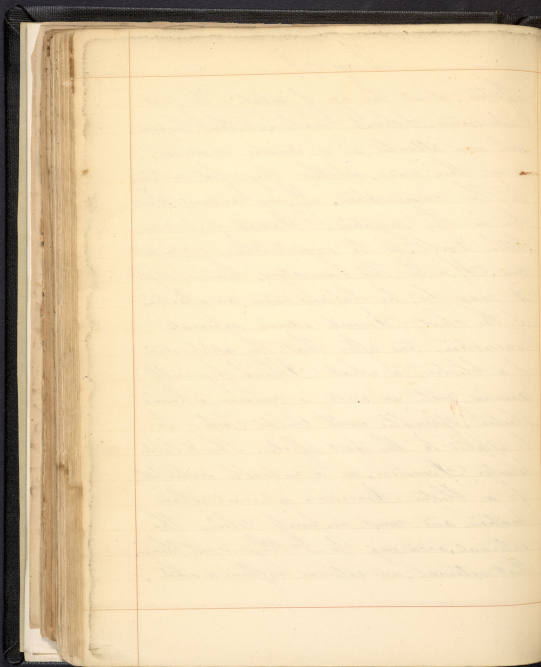
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affection, about the age of puberty, the first
interrogation, I should make, whether his parents
were ever attacked in a similar manner,
or in other words, whether they fell victims
to the consumption. If my answer should
be in the negative, I would feel very
little doubt, as to accomplishing a complete
cure. If with this hæmoptoe, however slight
it may be, he labours under an affection
of the chest, I would advise moderate
venesection, and after that, the application
of a blister, a what I think frequently
answers quite as well, a common adhesive
plaster, sprinkled with Canthar Tartar, to
be applied to the part affected. This E. Tartar
plaster I consider, as a reliable substitute,
for a blister. Occasions external inflam-
-mation, and must necessarily relieve the
internal, according to Dr. Sydenham's just theory,
that external, and internal inflammation,



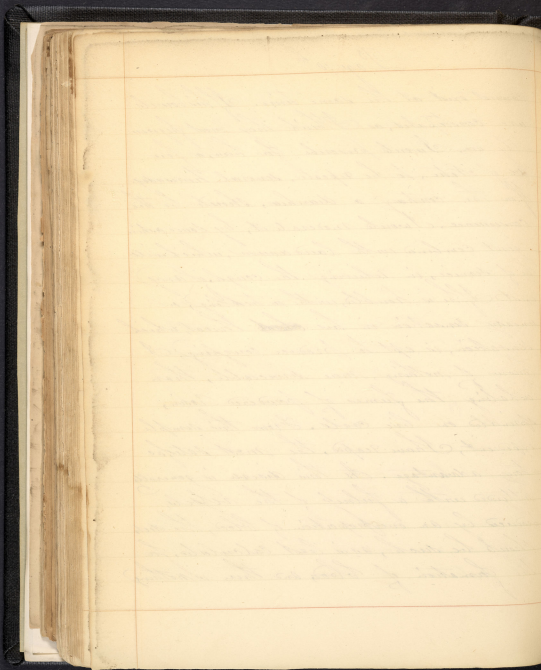
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cannot exist at the same time. If his bowels
are constipated, as I think they must frequently
be, I would prescribe for him, a few
grs of Nitre, to be repeated, several times a day.
If on the contrary a diarrhea, should be the
consequence, I would moderate it, by some astring-
ent combined with Laudanum, which will
be of service, in relieving the cough, if any
exist. If he is troubled, with a hoarseness, or
uneasy sensation in his ~~chest~~ throat, which
sensation, is apt to produce coughing, I
know of nothing, more serviceable, than
inhaling the fumes of powdered rosin,
sprinkled on live coals. From this simple
expedient, I have reaped, the most satisfac-
tory advantage. As this disease is generally
attended with a fulness of the vessels,
produced by an overpropagation of blood, the diet
should be such, as is least calculable, for
the formation of blood, and there is nothing



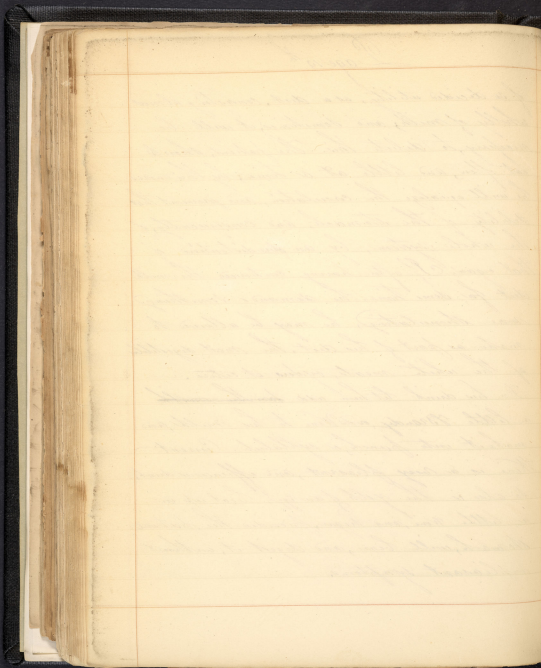
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of decided utility, as a diet, consisting almost wholly of milk; and sometimes, it will be necessary, to dilute this. The patient, should eat often, and little at a time; by this means he will equalize the circulation, and prevent that debility of the stomach, and consequently, of the whole system, by an overdistention of that organ. If after having continued the milk diet for some time, he demands something more stimulating, he may be allowed to make as part of his diet, the most digestible of the white meats, oysters &c &c. For his drink let him add ~~some~~ a little Brandy, or Wine to his milk, and make it into punch, or syllabub. Current Wine is a very pleasant, and efficacious drink, so also is the yolk of an egg, beat up in a little wine, and sugar, provided the patient's stomach, will bear, and digest it, without unpleasant symptoms.



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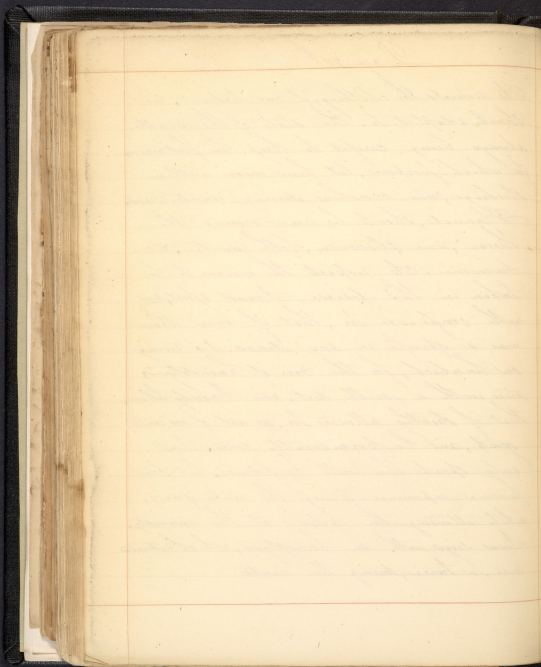
As respects the clothing, of our patient, he should adapt it to the state of the weather, always being careful to keep his feet warm, for which purpose, let him wear wollen stockings, and overcoats during winter season. Flannel, should be worn around the throat, and abdomen, both winter, and summer. As respects the exercise to be taken in this disease, I must assert, and with confidence too, that if ever there was a specific in any disease, it is riding on horseback, for the cure of Hemoptoe, aided with a milk diet, and I verily believe, that if strictly attended too, go out of us will cure, and be permanently cured. I not only speak this with confidence, but from personal experience. During the winter of 1817, while attending the lectures at this university, I was seized with an Hemoptoe, which returned once, or twice, during the winter.



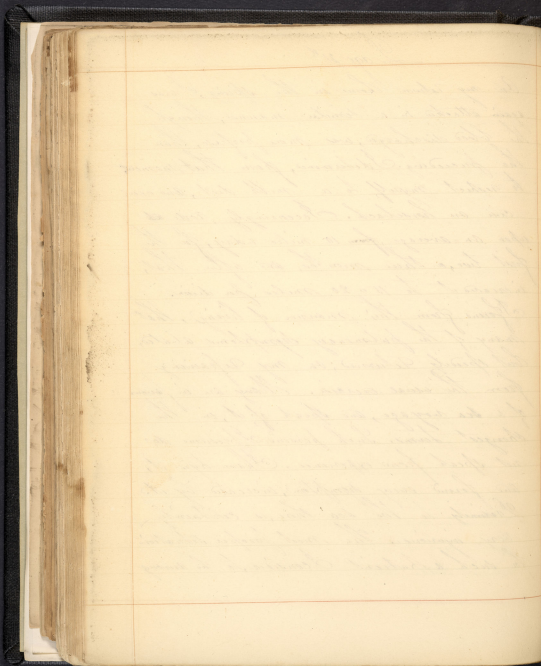
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On my return home in the spring, I was again attacked in a similar manner, though the blood discharge, was more profuse, than the preceding. I determined, from that moment, to subject myself to a milk diet, and exercise on horseback. I successively rode upon an average, from 10 miles a day, for the first two, or three months, and after that, increased it to 15 or 20 miles per diem.

I learn from this manner of living, that many of the pulmonary symptoms abated, but speedily returned, on my repairing from the usual exercise. Many are in favour of a sea voyage, and speak of it, in the strongest terms. Such persons I presume do not speak from experience. I have tried it, and found every symptom, increased by it. Proximity to the sea shore, is certainly very injurious. The most proper destination for such a patient I consider, to be among

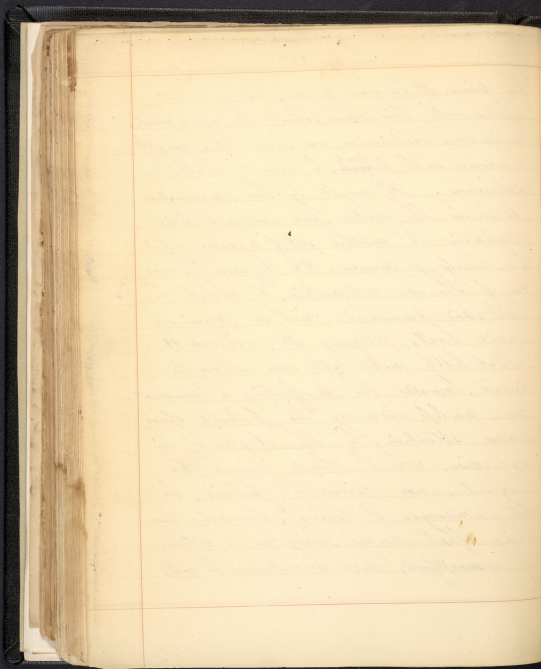


the pines. It has occurred to me, that a patient
affected with this disease, about the age of puberty,
provided every contingency was favourable, might
be advised with propriety, to connect himself in
marriage. He might by this measure
alter the system, and produce a deter-
mination to another set of organs. This
is merely a surmise. On regard to the exer-
cise of the upper extremities, it should be
light, and amusing, such as rowing a
small boat, playing at billiards &c.
But little will all our attempts
avail, towards the effecting a permanent
cure, unless aided by the patient's assid-
-ous attention, to the degree of his
exercise, which should never be
violent, nor carried to fatigue, to
his manner of living, avoiding any
thing that may bring on a return
of hæmoptoe, such as exposure to cold,



long continued, or violent declamation,
Cold damp feet, violent exercise after a
full meal, and more particularly, when
exposed at the same time, to the rays
of a warm sun. Much more might
be said on this subject, but what
little has, will perhaps, appear so
uninteresting, and at the same time,
so undignified, as to weary the patience,
of my readers.

I will therefore conclude,
by requesting their indulgence, in looking
over the errors, that might escape,
the notice of a diffident, and inexpe-
rienced youth. ~~1788-19~~ 1788-19 A.D. 1788-19



Isaac R. Rabin

admitted March 26th 1891

